

NEGATIVE REPORT FOR UNCLAIMED PROPERTY

Report And Payment Due By November 1.

Washington Holder Number		
Federal ID Number	Report Year	Sequence No.
Date & State of Incorporation		NAICS Code
Primary Business Activity		
Contact Person:		UBI #

Business Name: _____
 Attn or in care of: _____
 Mailing Address: _____

 City, State, Zip: _____

Name _____ Telephone Number _____
 E Mail Address _____

- No Property to Report:** ☐ Check here if you do not have any property to report, and complete the declaration below.
Close Account: ☐ Check here if your business is closing or is closed.
Inactive Account: ☐ Check here if you do not anticipate having property to report. **NOTE:** You will need to request report forms or other communications if you need to report in the future.

Report Declaration:

I declare that this report, including accompanying statements, has been examined by me; that I am duly authorized by the holder herein to execute this report, and that I believe said report is true, correct, and complete for the stated period.

Signature _____ Title _____ Date _____

NEGATIVE REPORT INSTRUCTIONS

Holder Reporting Number, Name and Address: Enter your information in the name and address fields. This address will be used for any future reports or correspondence regarding unclaimed property.

Name and Address Change: If the address on the label is incorrect, enter the correct address in the space provided. Please note any name changes, mergers, and/or listing of subsidiaries that may be reporting under the same holder name.

Washington Holder Number: Enter your reporting number (If first time reporting a holder number will be assigned).

Federal ID Number (FEIN): Enter your nine digit federal identification number.

Report Year: Enter the current year.

Sequence No.: Department use only.

Date and State of Incorporation: Enter your state of incorporation and the date incorporated.

NAICS: Please enter your company's North American Industry Classification System (NAICS) number if known. (Not required)

Primary Business Activity: Briefly describe your primary business activity.

UBI Number: Enter your Washington State Unified Business Identifier (UBI), if known.

Contact Person: Enter the name, telephone number and e-mail address of the person most familiar with the details of the report.

No Property to Report: By checking this box you are indicating that you have nothing to report for the current report year.

Closed Account: If the company has closed or merged with another and the account should be closed please indicate this by checking this box.

Inactive Account: Check this box if your company is still in business, but you do not anticipate having any property to report.

Report Declaration: The report must be signed by an authorized individual.

Office Use Only	
Entered by	_____
Date Recd	_____
Balanced	_____